

Public Service Commission of the District of Columbia

**Community Hearing
Formal Case 1119
List of Speakers (Pre-Registered)**

Date: November 17-18, 2015
 Time: 10:00 a.m. to 7:00 p.m.
 Location: Hearing Room
 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
 Washington, DC 20005

	NAME	ADDRESS	TELEPHONE NUMBER	REPRESENTING SELF or COMPANY	SPECIAL NEEDS	NOTES
1.	David Jonas Bardin			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
2.	Robert Vinson Brannum			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
3.	John Capozzi			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
4.	John Thomson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
5.	John Mcgregor				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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6.	Ivan Frishberg				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
7.	Robert & Sherrill Berger			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
8.	Kathy E. Hollinger				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
9.	Edmund Fleet			Building Bridges across the River	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
10.	Anthony Williams			Federal City Council	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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11.	Marchant Wentworth			Wentworth Green Strategies	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
12.	Joseph Persichini, Jr.			Washington DC Police Foundation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
13.	Kemi Morten			Alliance	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
14.	Emily Stiever			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
15.	Keshini Ladduwahetty			DC for Democracy	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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16.	Tim Judson			NRIS	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
17.	Allison Archambault			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
18.	Lynn Mento			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
19.	Monroe Harrison			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
20.	Diane D'Arrigo			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
21.	Antonio Francis			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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22.	Keith Sellars			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
23.	George H. Lambert			The Greater Washington Urban League	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
24.	Joe Andronaco			Access Green	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
25.	Allison Fisher			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
26.	Anthony Cancelosi			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
27.	Elana Orbuch			AVODAH: The Jewish Service Corps	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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28.	Pat Bahn				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
29.	John Chelen				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
30.	Rev. Kip Banks			East Washington Heights Baptist Church	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
31.	Mike Ewall			Energy Justice Network	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
32.	Sarah Saylor				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
33.	Samuel Jordan			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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34.	Jeffrey Franco			City Year	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
35.	Andrea Molod				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
36.	Meta Renee Williams, J.D.				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
37.	Mary C. Young ANC3B04				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
38.	Tamara Smith			YWCA National Capital Area	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
39.	Mykiel Rausu-Bey			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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40.	Dale Bannon			The Salvation Army	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
41.	Johnnie Rice			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
42.	Pat Bahn			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
43.	Kirby Vining			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
44.	Deborah Shore				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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45.	Joyce Robinson-Paul			Consumer Utility Board	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
46.	Mary Beth O'Quinn			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
47.	Marcia Rucker			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
48.	Renee Bowser ANC 4D02 Commissioner ANC 4D Vice Chair			ANC 4D	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<i>Ms. Bowser would like to give her testimony on Wednesday, November 18, 2015.</i>

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49.	Eric L. Evans			100 Black Men Of Greater Washington, D.C.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
50.	Jesse Lovell			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
51.	Arrington Dixon			ADA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
52.	Glen O'Gilvie			Center for Nonprofit Advancement	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
53.	George Fenderson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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54.	Pedro Alfonso			Dynamic Concepts, Inc.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
55.	Shavon Smith			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
56.	Bonnie Fogel			Imagination Stage	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
57.	Anthony Dinkins			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
58.	Matthias Paustian			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
59.	Charles Shipp			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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60.	Armentha Mike Cruise			Aspen Group Inc.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
61.	Shelore Ann Williams			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
62.	Yvonne M. Rice			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
63.	Janice H. Davis			SELF/Davis & Davis, Inc.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
64.	Gloria Hightower			Friends of Carter Barron	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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65.	Harry Wingo			DC Chamber of Commerce	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
66.	Nina Dodge			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
67.	Shilpa Joshi			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
68.	Dr. Karl Reid				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
69.	Angela Franco			Greater Washington Hispanic Chamber of Commerce	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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70.	Wilma Harvey				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
71.	Pam Frank				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
72.	Bernadette Harvey			BCONSTRUX	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
73.	Dr. E. Faye Williams			National Conference of Black Women	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
74.	Andrea Rosen			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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75.	Tania Miller			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
76.	Albrette "Gigi" Ransom			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
77.	Martin Harwit			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
78.	Richard Lee			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
79.	Melanie Coburn			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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81.	David Freeman				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
82.	Camelia Mazard			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
83.	Adrian Ganio			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
84.	G. Lee Aikin			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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85.	Maria Patricia Corrales			Capital Construction	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
86.	Dr. Eileen Crawford-Taylor			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
87.	Sheila Reid			Avanti Realty	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
88.	Nick Reid			Avanti Realty	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
89.					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

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90.	Tanya Hinton			Culture DC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
91.	Terry Lee			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
92.	Marqus Bigelow			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
93.	Samuel Batts			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
94.	Bernice Rink			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

**Community Hearing
Formal Case 1119
List of Speakers (Pre-Registered)**

Date: November 17-18, 2015
 Time: 10:00 a.m. to 7:00 p.m.
 Location: Hearing Room
 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
 Washington, DC 20005

	NAME	ADDRESS	TELEPHONE NUMBER	REPRESENTING SELF or COMPANY	SPECIAL NEEDS	NOTES
95.	Alberta Gaskins			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
96.	Allen Burris				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
97.	Dr. Sheila Brooks				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
98.	Charles Brown, Jr.				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
99.	Beverly Short				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
100.	D. Morris Michael				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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101.	James J. Fournier, Esq.				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
102.	Laurence E. Jackson, Ph.D.				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
103.	David Arkush				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
104.	Talib I. Karim			STEM4US	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
105.	Winifred Y. Carson-Smith				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
106.	Lennette Watts				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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107.	Sean Cahill			DC Building Industry Association	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
108.	Rod Woodson			DC Building Industry Association	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
109.	Sheila H. Westfield			The Greater Washington Urban League	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
110.	James Riley McGrif			Project Learning Tree	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
111.	Cora Williams			Ideal Electric	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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112.	Nathaniel Catlett				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
113.	Earl Sullivan			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
114.	Sam Tramal			DC Children's Trust Fund	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
115.	James Cooke				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
116.	William J. Snape, III				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
117.	Keith Silver			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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118.	Timothy Shaw			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
119.	Patricia Gomillion			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
120.	Leona Redmond			Wesley House Resident Council	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
121.	Monique Sullivan			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
122.	Gloria Murchison			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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123.	Francis Prophet			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
124.	Dahfon Williams			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
125.	Brenda Wells			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
126.	Sabrina Stephens				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
127.	Andre Lee				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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128.	Debra Quartermaine				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
129.	Rev. Dr. Crawford				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
130.	Jay Johnson				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
131.	Victor Coclough				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
132.	Debby Hanrahan			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

**Community Hearing
Formal Case 1119
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133.	Mark Davis			WDC Solar, Inc.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
134.	Brenda Devroux			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
135.	Jim Dinegar			Greater Washington	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
136.	Charles Gaither			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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137.	Earl Fowlkes			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
138.	Jennifer Tucker			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
139.	Michael Beale			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
140.	Aaron McCormick			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
141.	Danita Doleman			Seas Community Partners	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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142.	Kassahun Tefera			Metro Lab DC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
143.	Nathan Groce			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
144.	Lavinia Wohlfarth			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
145.	Milton Morris			MDM Office Systems	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
146.	Kendrick Richardson			RDS Architecture	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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147.	Basav Sen			Green Neighbors	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
148.	Eric Evans			The One Hundred Black Men of Greater Washington, DC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
149.	Geraldine Bell			Parkside Civic Association	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
150.	Adrian Gaino			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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151.	Almandeus Thornton			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
152.	Andree Lee			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
153.	Anthony Reeves			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
154.	Anthony Reeves, Sr.			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
155.	Anthony Shorts			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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	NAME	ADDRESS	TELEPHONE NUMBER	REPRESENTING SELF or COMPANY	SPECIAL NEEDS	NOTES
156.	Ayana Mayberry			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
157.	Beniya Valentine			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
158.	Bennie Lawson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
159.	Betty Hodges			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
160.	Carmen Robles-Inman			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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161.	Carolyn Mitchell Bell			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
162.	Carolyn Woods			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
163.	Casten Manley			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
164.	Cecelia Thorne			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
165.	Celia Barnes			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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166.	Christopher Parler			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
167.	Clifford Thorne			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
168.	Dantes Augustin			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
169.	Darmaine Clark			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
170.	David Boyd			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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171.	David Johnson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
172.	Dena Walker			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
173.	Denise Barner			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
174.	Diane Barnes			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
175.	Diane Wilks			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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176.	Donovan Harris			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
177.	Dr. Bill Hassan			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
178.	Duane Wilson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
179.	Eddy Varona			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
180.	Evelyn Rodgers			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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 Washington, DC 20005

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181.	Frank Malone			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
182.	Fred Lockett			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
183.	Gloria Dade			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
184.	Herbert Briscoe			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
185.	Jessica Thomas			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

**Community Hearing
Formal Case 1119
List of Speakers (Pre-Registered)**

Date: November 17-18, 2015
 Time: 10:00 a.m. to 7:00 p.m.
 Location: Hearing Room
 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
 Washington, DC 20005

	NAME	ADDRESS	TELEPHONE NUMBER	REPRESENTING SELF or COMPANY	SPECIAL NEEDS	NOTES
186.	JoAnn Johnson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
187.	Keera Cunningham			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
188.	Keeta Watts			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
189.	Keith Dickinson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
190.	Kim Wood			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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 Washington, DC 20005

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191.	Kindra Beamon			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
192.	Kurt Adams			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
193.	Leon Samuels, Jr.			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
194.	Lonnie Beamon			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
195.	Margaret Winston			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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196.	Margaret Harison			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
197.	Nathan Perkins			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
198.	Paul Cook			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
199.	Phillip Cunningham, Jr.			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
200.	Phillip Cunningham, Sr.			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
 Washington, DC 20005

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201.	Rev. Michael Bell, Sr.			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
202.	Rev. Robert Childs			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
203.	Rosa Hightower			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
204.	Ruby Perry			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
205.	Saul Watts			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
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206.	Scotty Foxx			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
207.	Sean Metcalf			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
208.	Sequing Johnson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
209.	Sharon Valentine			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
210.	Sheresse Baltimore			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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Formal Case 1119
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 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
 Washington, DC 20005

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211.	Stacy Banks			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
212.	Symone Dickens			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
213.	Terry Goins			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
214.	Von Davenport			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
215.	Willie Delaney Barg			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

**Community Hearing
Formal Case 1119
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 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
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216.	Yvonne Coleman			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
217.	Michael Sindram			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
218.	Leotha Woodson			Noah's Arc	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
219.	Sylvia Ryan			Noah's Arc	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
220.	Gilbert Campbell				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

**Community Hearing
Formal Case 1119
List of Speakers (Pre-Registered)**

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 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
 Washington, DC 20005

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221.	Radindranauth (Rad) Ranson			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
222.	Jacques Kapuscinski			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
223.	Caroline Petti				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
224.	Jessica Champagne				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
225.	William (Billy) Eric Sahm				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

**Community Hearing
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 Public Service Commission of the District of Columbia
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 Washington, DC 20005

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226.	Pandit Wright			The Boys and Girls Club of Greater Washington	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
227.	Dale Doucette				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
228.	Stuart Cameron				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
229.	Evanna Powell				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
230.	Chris Otten			DC For a Reasonable Development	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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 Public Service Commission of the District of Columbia
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231.	Kendrick Richardson				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
232.	Shireen Parsons			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
233.	Benjamin King			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
234.	Benton Murphy			The Community Foundation for the National Capital Region	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
235.	Lynn Raskin			Climate Change Literacy	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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 Public Service Commission of the District of Columbia
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236.	Kevin Kamps				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
237.	Barrett Ware				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
238.	Mark Jones			M. Jones Companies & National Business League	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
239.	Melvin Hines			S.E. Restaurant Group	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
240.	Mark McDonald			Minority Business Economic Council	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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241.	Romaine B. Thomas			DC Office on Aging	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
242.	Ruth Kaplan			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
243.	Frederic W. Schwartz, Jr.			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
244.	Ross Schulman			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
245.	Elizabeth Berry			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

**Community Hearing
Formal Case 1119
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 Public Service Commission of the District of Columbia
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246.	Mary Bolton				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
247.	Larry Werner			SELF	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
248.	Peter Murtha				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
249.	Joanna Spear				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
250.	Jeffery Hargrave				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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 Public Service Commission of the District of Columbia
 1325 G Street, NW, 8th Floor
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	NAME	ADDRESS	TELEPHONE NUMBER	REPRESENTING SELF or COMPANY	SPECIAL NEEDS	NOTES
251.	Doug Duncan				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
252.	Dasarath Kiridena				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
253.	Anwar Saleem				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
254.	Bob Andretta				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
255.	Corey Griffin				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
256.	Gwen Jackson				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact

Public Service Commission of the District of Columbia

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Formal Case 1119
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257.	Harriet Pullman				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
258.	John Thomas				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact
259.	Joigie Tolson				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Explain	<input type="checkbox"/> Delivered Message <input type="checkbox"/> Left Voicemail Message <input type="checkbox"/> No Contact